

UNITE HERE TIP Campaign Committee

275 7th Avenue 10th Floor

New York

NY

10001

FEC ID No. C00004861

☒ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 1 / 2

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) UNITE HERE TIP Campaign Committee	FEC IDENTIFICATION NUMBER C C00004861
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Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Promoco

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount

742.00

City Petaluma	State CA	Zip Code 94952
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Purpose of Expenditure
Campaign MaterialsCategory/
Type 006Office Sought: ☒ House State: CT
☐ Senate District: 4
☐ PresidentialCheck One: ☐ Support ☒ OpposeDisbursement For: ☐ Primary ☒ General 2006☐ Other (specify) : _____

Transaction ID: 30

Calendar Year-To-Date Per Election

37340.27

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

ADP Payroll Processing

Date

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 6

Amount

2347.13

City New York	State NY	Zip Code 10001
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Purpose of Expenditure
Payment for staff se-
rvicesCategory/
Type 001Office Sought: ☒ House State: CT
☐ Senate District: 4
☐ PresidentialCheck One: ☐ Support ☒ OpposeDisbursement For: ☐ Primary ☒ General 2006☐ Other (specify) : _____

Transaction ID: 31

Calendar Year-To-Date Per Election

39687.40

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

3089.13

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

John W Wilhelm

Signature

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 2 / 2

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
UNITE HERE TIP Campaign Committee

FEC IDENTIFICATION NUMBER

C C00004861

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

ADP Payroll Processing

Date

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 6

Mailing Address

42 Broadway

Amount

2347.12

City

New York

State

NY

Zip Code

10001

Purpose of Expenditure

Payment for staff se-
rvicesCategory/
Type

001

Office Sought:

☒ House

State: CT

☐ Senate

District: 4

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2006☐ Other (specify) : _____

Transaction ID: 32

Calendar Year-To-Date Per Election

38945.36

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

2347.12

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

5436.25

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

John W Wilhelm

Signature

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 6